

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	BZ	JC3-283	09-10-01
RESPONSE FORMALITY REVIEW	TZ	947	02/28/02

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	6/10/01
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
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11	✓
12	✓
13	✓
14	✓
15	✓
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Claim	Date
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If more than 150 claims or 10 actions  
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126  
 10/10/01  
 50-57/1  
 02/28/02